## Issue Classification



| Application/Control No. | Applicant(s)/Patent Under Reexamination |
|-------------------------|---|
| 10598335                | GEHMAN ET AL.                           |
| Examiner                | Art Unit                                |
| Lee S Cohen             | 3739                                    |

| ORIGINAL CLASS SUBCLASS |                                     |          |          |    |   | INTERNATIONAL CLASSIFICATION |   |                   |  |  |  |             |  |  |   |
|-------------------------|-------------------------------------|----------|----------|----|---|------------------------------|---|-------------------|--|--|--|-------------|--|--|---|
|                         |                                     |          |          |    |   | CLAIMED                      |   |                   |  |  |  | NON-CLAIMED |  |  |   |
| 600 391                 |                                     |          |          | Α  | 6 | 1                            | В | 5 / 0408 (2006.0) |  |  |  |             |  |  |   |
|                         | С                                   | ROSS REI | FERENCE( | S) |   |                              |   |                   |  |  |  |             |  |  | _ |
| CLASS                   | S SUBCLASS (ONE SUBCLASS PER BLOCK) |          |          |    |   |                              |   |                   |  |  |  |             |  |  | _ |
| 600                     | 392                                 | 393      | 509      |    |   |                              |   |                   |  |  |  |             |  |  |   |
|                         | 1                                   |          |          |    |   |                              |   |                   |  |  |  |             |  |  |   |
|                         |                                     |          |          |    |   |                              |   |                   |  |  |  |             |  |  |   |
|                         |                                     |          |          |    |   |                              |   |                   |  |  |  |             |  |  | _ |
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|                         |                                     |          |          |    |   |                              |   |                   |  |  |  |             |  |  |   |

|       | Claims renumbered in the same order as presented by applicant |       |          |       |          |       |          | ☐ CPA ☐ T.D. ☐ R.1.47 |          |       |          |       |          | 47    |          |
|-------|---|-------|----------|-------|----------|-------|----------|-----------------------|----------|-------|----------|-------|----------|-------|----------|
| Final | Original  | Final | Original | Final | Original | Final | Original | Final                 | Original | Final | Original | Final | Original | Final | Original |
| 1     | 1   | 16    | 17       |       |          |       |          |                       |          |       |          |       |          |       |          |
| 2     | 2   | 17    | 18       |       |          |       |          |                       |          |       |          |       |          |       |          |
| 3     | 3   |       |          |       |          |       |          |                       |          |       |          |       |          |       |          |
| 5     | 4   |       |          |       |          |       |          |                       |          |       |          |       |          |       |          |
| 9     | 5   |       |          |       |          |       |          |                       |          |       |          |       |          |       |          |
| 10    | 6   |       |          |       |          |       |          |                       |          |       |          |       |          |       |          |
|       | 7   |       |          |       |          |       |          |                       |          |       |          |       |          |       |          |
| 6     | 8   |       |          |       |          |       |          |                       |          |       |          |       |          |       |          |
| 11    | 9   |       |          |       |          |       |          |                       |          |       |          |       |          |       |          |
| 4     | 10  |       |          |       |          |       |          |                       |          |       |          |       |          |       |          |
| 7     | 11  |       |          |       |          |       |          |                       |          |       |          |       |          |       |          |
| 8     | 12  |       |          |       |          |       |          |                       |          |       |          |       |          |       |          |
| 12    | 13  |       |          |       |          |       |          |                       |          |       |          |       |          |       |          |
| 13    | 14  |       |          |       |          |       |          |                       |          |       |          |       |          |       |          |
| 14    | 15  |       |          |       |          |       |          |                       |          |       |          |       |          |       |          |
| 15    | 16  |       |          |       |          |       |          |                       |          |       |          |       |          |       |          |

| NONE  | Total Claims Allowed: |                     |                   |  |  |  |
|---|-----------------------|---------------------|-------------------|--|--|--|
| (Assistant Examiner)                            | (Date)                | 17                  |                   |  |  |  |
| /Lee S Cohen/<br>Primary Examiner.Art Unit 3739 | 12/16/10              | O.G. Print Claim(s) | O.G. Print Figure |  |  |  |
| (Primary Examiner)                              | (Date)                | 1                   | 1                 |  |  |  |